BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09752539

CLAIMS AS FILED - PART I (Column 1)						(Column 2)		SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			70					RATE	FEE	[RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		'	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			20 min	// minus 20= *		*		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		*			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL		OR	TOTAL	710
CLAIMS AS AMENDED - PART (Column 1) (Colum						(Column 3)		SMALL E	NTITY	OR	OTHER SMALL	
		CLAIMS		HIGH	IEST		l		ADDI-			ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT	·	NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	* 25	Minus	** 7	20	= 5		X\$ 9=	45	OR	X\$18=	
	Independent	٠ 2	Minus	*** ,	2	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEP	ENDEN	T CLAIM		ı	+135=		OR	+270=	
			_					TOTAL			TOTAL	
	(Column 1) (Column					nn 2) (Column 3)		ADDIT. FEE		J	ADDIT. FEE	
AMENDMENT B		CLAIMS	,	HIGH	I EST		1 1		ADDI-			ADDI-
		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	CLAIM		J	+135=		OR	+270=	
							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE [*]	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1	X\$ 9=	1 1,-1,-	OR	X\$18=	1
	Independent	*	Minus	***		=		X40=			X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM]	740-		OR		
	* If the onter is column 1 is loss than the onter is solumn 2 write "O" is column 2									OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
""		imber Previously F nher Previously Pa					er fo	und in the apr	propriate bo	x in co	lumn 1.	